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Bib Data Sheet

CONFIRMATION NO. 8234

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|---|---|-------------------------------|---|---------------------------------------|
| SERIAL NUMBER 09/802,742 | FILING DATE 03/08/2001 RULE | CLASS 725 | GROUP ART UNIT 2611 | ATTORNEY DOCKET NO. 442 - 2 |
| APPLICANTS John R. Carlile, Springfield, MO; | | | | |
| ** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/229,178 08/29/2000 AND CLAIMS BENEFIT OF 60/224,262 08/10/2000 AND CLAIMS BENEFIT OF 60/187,952 03/09/2000 | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/19/2001 | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials | | STATE OR COUNTRY MO | SHEETS DRAWING 7 | TOTAL CLAIMS 20 |
| INDEPENDENT CLAIMS 3 | | | | |
| ADDRESS Jonathan A. Bay Attorney at Law Suite 314 333 Park Central East Springfield, MO 65806 | | | | |
| TITLE In-waiting room health-care information service | | | | |
| FILING FEE RECEIVED 420 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | |